



PATENT

Attorney Docket No.: 16869P-010900US

Client Ref. No.: 340000115US1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Mika Mizutani, et al.

Application No.: 09/823,135

Filed: March 30, 2001

For: MOBILE COMMUNICATION
SYSTEMS, MOBILE STATIONS, BASE
STATION CONTROLLERS AND
PACKET DATA SERVICE NODES

Customer No.: 20350

Confirmation No. 8664

Examiner: Un C. Cho

Technology Center/Art Unit: 2687

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

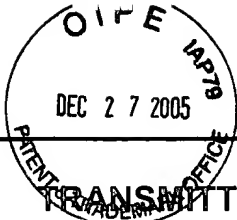
December 22, 2005

Sir:

In response to the Office Action mailed October 6, 2005, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 13 of this paper.



PTO/SB/21 (09-04)

(f2)

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/823,135	
	Filing Date	March 30, 2001	
	First Named Inventor	Mizutani, Mika	
	Art Unit	2687	
	Examiner Name	Un C. Cho	
Total Number of Pages in This Submission	15	Attorney Docket Number	16869P-010900US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (5pp) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Jesus Del Castillo		
Date	December 22, 2005	Reg. No.	51,604

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Gloria Sikora	Date	December 22, 2005